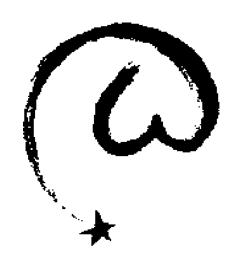
#### CHILD CARE & DEVELOPMENT FUND SERVICES

(FOR THE PERIOD 10/1/01 – 9/30/03)

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### CHILD CARE AND DEVELOPMENT FUND PLAN

# FOR CONNECTICUT

### FFY 2002-2003

This Plan describes the CCDF program to be conducted by the State for the period 10/1/01 - 9/30/03. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 162.57 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

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**ATTACHMENTS** 

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#### AMENDMENTS LOG

Child Care and Development Services Plan for <u>CONNECTICUT</u> For the period: 10/1/01 -- 9/30/03

SECTION AMENDED	EFFECTIVE/ PROPOSED EFFECTIVE DATE	DATE SUBMITTED TO ACF	DATE APPROVED BY ACF

#### Instructions:

- 1) Lead Agency completes the first 3 columns and sends a photocopy of this Log (showing the latest amendment sent to ACF) <u>and</u> the amended section(s) to the ACF Regional contact. A copy of the Log, showing the latest amendment pending in ACF, is retained in the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the <u>same</u> Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain those "old" plan pages that are superseded by amendments in a separate appendix to its Plan.

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# **PART 1 -- ADMINISTRATION**

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

### **1.1 Lead Agency Information:** (as designated by State chief executive officer)

Name of Lead Agency:

CONNECTICUT DEPARTMENT OF SOCIAL SERVCIES

Address of Lead Agency:

25 SIGOURNEY STREET HARTFORD, CT 06106

Name and Title of the

Lead Agency's Chief Executive Officer:

PATRICIA A WILSON-COKER, COMMISSIONER

Phone & Fax Numbers:

1-860-424-5008 1-860-424-5129 (FAX)

## **1.2 State Child Care (CCDF) Contact Information**: (day-to-day contact)

Name and Title of the

State Child Care Contact (CCDF):

PETER PALERMINO, PROGRAM MANAGER CHLD CARE TEAM

Address of Contact:

25 SIGOURNEY STREET HARTFORD, CT 06106

Phone & Fax Numbers:

1-860-424-5006

1-860-951-2996 (FAX)

E-Mail Address: peter.palermino@po.state.ct.us

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1.3 The Lead Agency <u>estimates</u> that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2001 through September 30, 2002. (§98.13(a))

-Federal Child Care & Development Fund: \$52,803,290

-Federal TANF Transfer to CCDF (if known): \$0

-Direct Federal TANF Spending on Child Care (if known): \$18,000,000 -State Maintenance of Effort Funds: \$18,738,357 -State Matching Funds: \$17,605,380

- 1.4 The Lead Agency <u>estimates</u> that the following amount (and percentage) of the CCDF will be used to administer the program (not to exceed 5 percent): \$2,112,260 (3 %). (658E(c)(3), §§98.13(a), 98.52)
- **1.5** Does the Lead Agency directly administer and implement <u>all</u> services, programs and activities funded under the CCDF Act, <u>including</u> those described in Part 5 Activities & Services to Improve the Quality and Availability of Child Care?
  - ( ) Yes. GO to Section 1.8.
  - (x) No, and the following describes how the Lead Agency maintains overall control when services or activities are provided through other agencies. (658D(b)(1)(A), §98.11)

The Lead Agency implements various services in conjunction with contracted governmental, private and not-for-profit community based organizations. The Lead Agency monitors all contracted entities for compliance with state and federal regulations.

- **1.6** For **child care services** funded under §98.50 (i.e., certificates, vouchers, grants/contracts for slots **based on individual eligibility**), does the Lead Agency itself: (§98.11)
  - Determine individual eligibility of non-TANF families? YES \_\_\_\_ NO x
     If NO, identify the name and type of agency that determines eligibility of non-TANF families for child care:

The Lead Agency contracts with MAXIMUS, INC, a private organization, to administer the state's certificate/voucher program titled the Child Care Assistance Program (CCAP). The Lead Agency also contracts with numerous private and not-for-profit child care centers to administer the contracted program.

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Determine individual eligibility of TANF families? YES \_\_\_\_\_ NO x
 If NO, identify the name and type of agency that determines eligibility of TANF families for child care:

The Lead Agency contracts with MAXIMUS, INC, a private organization, to administer the state's certificate/voucher program titled the Child Care Assistance Program (CCAP).

• Assist parents in locating child care? YES\_\_\_\_\_ NO <u>x</u>

If NO, identify the name and type of agency that assists parents:

The Lead Agency contracts with the United Way of CT's statewide Child Care INFOLINE project, which is the state's resource and referral agency. The Child Care INFOLINE operates a statewide telephone service with office sites and community liaisons in each of the five state human services regions.

- Make payments to providers? YES <u>x</u> NO <u>x</u> **If NO**, identify the name and type of agency that makes payments:
- Yes The Lead Agency provides payments to child care centers and school-age programs funded through its contracted child care component.
- No The Lead Agency has contracted with MAXIMUS, INC, a private organization, to provide payments to providers enrolled in the state's Child Care Assistance Program (CCAP).
- 1.7 Is any entity named in response to section 1.6 a non-governmental entity? (658D(b), §§98.10(a), 98.11(a))
  - ( ) No.
  - (x) Yes, the following entities named in section 1.6 are non-governmental:

MAXIMUS, United Way of CT, and the numerous private and not-for-profit child care centers.

# **Section 1.8 - Use of Private Donated Funds**

- 1.8.1 Will the Lead Agency use private donated funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2) and (f)?
  - (x) No. GO TO 1.9
  - ( ) Yes, and the entity designated to receive private donated funds is:

Name of entity:

Address:

Contact:

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gov	vernmental agency? (§98.11(a))
( )	Yes. No.
Section 1.	9 - Use of State Pre-Kindergarten (Pre-K) Expenditures
1.9.1	During this plan period, will State expenditures for Pre-K programs be used to meet <u>any</u> of the CCDF maintenance of effort (MOE) requirement?

1.8.2 Is the entity designated to receive private donated funds (named above) a non-

- (x) No.
- ( ) Yes, and the State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).
- During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF Matching Fund requirement? (§98.53(h))
  - (x) No.
  - ( ) Yes, and the following describes State efforts to ensure that pre-K programs meet the needs of working parents (§98.53(h)(2)):
- 1.9.3 Will the State use Pre-K expenditures to meet <u>more</u> than 10% of the:
  - Maintenance of effort requirement, OR
  - Matching fund requirement?

If No to both, CHECK HERE x.

If Yes to either, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)).

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# PART 2 -- DEVELOPING THE CHILD CARE PROGRAM

## **Section 2.1 – Consultation and Results of Coordination:**

Describe the consultations the Lead Agency held in developing this Plan. At a minimum, the description must include the following: 1) the representatives of local governments (including tribal organizations when such organizations exist within the boundaries of the State) that were consulted (658D(b)(2), §§98.12(b), 98.14(b)); and, 2) the results of coordination with other Federal, State, local, and tribal (if applicable) agencies and programs including those involved with public health, employment, public education, and TANF. (658D(b)(1)(D), §§98.12(a), 98.14(a)(1) & (2))

The Lead Agency completed a series of activities to develop the Plan. The Lead Agency partnered with the United Way of CT's Child Care INFOLINE Project and CT Child Day Care Council, which has state statutory authority to advise the Lead Agency concerning the development of the CCDF Plan. The three entities scheduled four statewide public forums to review the CCDF federal law/regulations, Connecticut child care laws/regulations, and the final draft CCDF plan. We also scheduled ten public hearings in each of the respective five CT human service regions. The Lead Agency notified various advocacy, state/local governmental and community based organizations such as the CT Child Care Legislative Collaborative, the CT State Head Start Collaboration, the Head Start and State Supported Child Care Center Director Forums, and the School Readiness Councils. The Lead Agency hosted several focus groups with parent and child care constituency groups to review the existing state's Child Care Assistance Program (CCAP) as part of it's task to develop new uniform child care subsidy regulations and complete the CCDF Plan.

The Lead Agency is responsible for coordinating child care services and other programs, which affect families and children in Connecticut. The Lead Agency works in consort with other partners (federal, state and local, public and private, government and community-based) to administer services and foster linkages between agencies, organizations, advocates, clients and community groups in an effort to coordinate services and to develop a comprehensive and integrated child care/children's health and development network.

The Lead Agency ensures that the federal funding streams are integrated within the Connecticut child care/early childhood system and acts as a conduit for information flowing to and from the community. The Lead Agency published its strategic direction for supporting families, children and caregivers as part of its draft CCDF Plan. The guiding principles, service objectives, and service strategies are attached (see Attachment 2.1 – A).

The following are key organizations that the Lead Agency has developed collaborative arrangements. We have attached documents (see Attachment 2.1 - B) that describe specific projects.

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#### **Child Day Care Council**

The Child Day Care Council is a legislatively mandated body which serves as forum for Connecticut citizens interested in child care and as an advisory committee to the Lead Agency on child care issues and the development of the CCDF Plan. The CCDF Administrator is the Lead Agency commissioner designee to the Council. The Lead Agency provides administrative support to the Council.

# **Commission on Children**

The Commission on Children was established by the State Legislature and is charged with developing public policy and advocacy on behalf of children. The Lead Agency has partnered with the Commission to develop various consumer education materials such as the *Are You Ready*, *Watch Me Grow, and Healthy Expectations* brochures.

# CT Department of Public Health (DPH)

DPH is the state agency responsible for the licensing, regulation and inspection of child day care centers, group homes and family day care homes. DPH is also the state lead agency for immunization and maternal and health issues. The Lead Agency funds licensing enforcement personnel hired by DPH.

### CT Department of Education (SDE)

SDE is the agency responsible for public education. SDE has a Bureau of Early Childhood Education and Social Services which provides oversight for state Head Start funds, the federal Child Care and Adult Nutrition program, the state funded family resource programs and pre-school programs. SDE staff provide technical assistance to licensed child care facilities. The Lead Agency has partnered with SDE to manage the state's School Readiness preschool initiative.

#### **CT Department of Children and Families (DCF)**

DCF is the agency responsible for child welfare, including protective services and the foster parents program. DCF conducts child abuse/neglect investigations for licensed and informal child care providers. The Lead Agency has partnered with DCF to implement a pilot program that provides background abuse/neglect checks for certain informal child care providers, educate parents about abuse/neglect situations, and coordinate various family support initiatives implemented by both agencies.

### CT Department of Public Safety (DPS)

DPS is the agency responsible for criminal background checks and all communications with the Federal Bureau of Investigation. DPS conducts criminal investigations for licensed and informal child care providers. The Lead Agency has partnered with DPS to implement a pilot program that provides background criminal checks for certain informal child care providers.

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## **Head Start**

There are sixteen Head Start organizations funded primarily with federal funds in CT and supplemented by state funds administered by SDE. The Lead Agency participates on the Head Start Advisory Committee and the federal Head Start Collaboration project. The CCDF administrator, the SDE Bureau Chief for Early Childhood Education, the CT Head Start Collaboration Director and the Head Start Directors Forum completed meetings with the ACF Head Start, Child Care and QUILT staff to build partnerships and eliminate barriers to successful program delivery.

## **Child Care INFOLINE**

Child Care INFOLINE is a statewide resource and referral service operated by the United Way of Connecticut that links parents to child care resources. Child Care INFOLINE maintains a statewide data base, which contains information on, fees, capacity, hours of operations, etc. They also operate a statewide recruitment project to expand the number of child care facilities in CT.

### **Board of Trustees for State Community and Technical Colleges**

This institution provides early childhood academic instruction, operates early childhood child care centers that serve as training laboratories and provides scholarships for early caregivers to attend training required for licensure or to expand their academic and/or professional development. The Board of Trustees for State Community and Technical Colleges has been designated by the Lead Agency to coordinate the state's voluntary career development system for early care professionals entitled *Connecticut Charts A Course*. This project also coordinates the Statewide Accreditation Facilitation Project that provides opportunities for child care facilities to receive training and support as they strive to attain their national accreditation status.

#### **Connecticut Department of Mental Retardation (DMR)**

DMR is the state's lead agency for serving families and children with special needs and specifically intervention services for children, birth to three. The Lead Agency is a member of the CT Birth to Three Coordinating Council. The Lead Agency and DMR have partnered to coordinate issues pertaining to children with special needs.

### **Connecticut Department of Labor (DOL)**

DOL is the state's lead agency for providing employment and training services. DOL is the state's welfare-to-work agency and has developed a partnership with the Lead Agency to assist TANF clients attain employment or training opportunities. The Lead Agency's contractor for the Child Care Assistance Program (CCAP) has developed an operations protocol to insure TANF clients receive child care financial assistance. The Lead Agency recently completed a successful application to pilot a Child Care Apprenticeship program.

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#### **Statewide Child Care Advocacy Organizations**

The Lead Agency consults with and provides technical assistance to various statewide advocacy organizations including, but not limited to: the CT School-age Child Care Alliance, the CT Association for Education of Young Children, CT Family Day Care Associations Network, CT Early Childhood Education Council, CT Association for Human Services, CT State Supported Child Care Centers Directors Forum, CT Voices for Children

#### **Healthy Child Care Connecticut**

The Lead Agency is a member of the Healthy Child Care CT initiative and has helped to fund a variety of projects that directly impact both child care providers and child care consumers. For example, information packets on the children's health insurance program and curricula on medication administration were developed/distributed to all child car providers.

### **Section 2.2 - Public Hearing Process:**

Describe the Statewide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. At a minimum, the description must include the date(s) of the hearing(s), how and when the public was notified Statewide of the hearing(s), the hearing site(s), and how the content of the Plan was made available to the public in advance of the hearing. (658D(b)(1)(C), §98.14(c))

Public hearings were held in five locations across the state in May 2001 and convened by representatives from the Lead Agency, Child Day Care Council and the United Way of CT's Child Care INFOLINE project. The public hearing notice (see Attachment 2.2- A) was mailed to child care providers, advocacy and community organizations, legislators and publicized in all major newspapers. Various child related advocacy groups distributed this information through their various networks. The Lead Agency included the hearing notice and the draft plan on its WEB site.

<u>Section 2.3 - Public-Private Partnerships</u>: Describe the activities, including planned activities, to encourage public-private partnerships, which promote private-sector involvement in meeting child care needs. (658D(b)(1), §98.16(d))

The Lead Agency is committed to the continued expansion and development of cooperative public-private ventures. To this end, the Department will: encourage employer groups and business associations to promote family support policies such as, flex-time and flexible work hours, promote child care tax credit programs, collaborate with the State Departments of Labor, and Economic and Community Development to integrate family and child care policies with economic policies and inform employers about family needs and work force trends, collaborate with the CT General Assembly to develop model child care policies and financing strategies which promote public-private partnerships.

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#### A few examples of public-private partnerships follows:

Child Care Facilities Loan Fund – the Lead Agency has partnered with the CT Health and Educational Facilities Authority (CHEFA), seven private banks, and a community investment corporation to provide loan opportunities to child care providers. The Lead Agency is also collaborating with a community development organization to provide technical assistance to child care providers participating in financing projects.

Early Childhood and Training Resource Academy – the Lead Agency is working with the Child Health and Development Institute, a component of the private Children's Fund foundation, to provide training opportunities, consistent with the *CT Charts a Course* initiative for early caregivers. This partnership provided training to nearly 4,000 caregivers in basic child health development over the past four years.

Child Care Assistance Program – The Lead Agency contracts with MAXIMUS, Inc, a private corporation to manage this program.

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#### PART 3 -- CHILD CARE SERVICES OFFERED

#### **Section 3.1 - Description of Child Care Services:**

<u>REMINDER</u>: The Lead Agency must offer certificates for services funded under 45 CFR 98.50. (98.30) Certificates must permit parents to choose from a variety of child care categories including center-based care, group home care, family child care and in-home care. (§98.30(e))

- 3.1.1 In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?
  - ( ) No.
  - (x) Yes, and the following describes the types of child care services and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

The Lead Agency will establish contracts directly with early childhood/child care facilities that meet licensing requirements established by the CT Department of Public Health for the provision of infant/toddler, preschool and/or school-age child care slots.

- 3.1.2 The Lead Agency must allow for in-home care, but may limit its use. Does the Lead Agency limit the use of in-home care in any way?
  - (x) No.
  - ( ) Yes, and the limits and the reasons for those limits are ( $\S98.16(g)(2)$ , 98.30(e)(1)(iv)):
- 3.1.3 Are all of the child care services described in 3.1.1 above (including certificates) offered throughout the State? (658E(a), §98.16(g)(3))
  - (x)Yes
  - ( ) No, and the following are the localities (political subdivisions) and the services that are not offered:

### **Section 3.2 - Payment Rates for the Provision of Child Care:**

The statute (at 658E(c)(4)) requires the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care and these rates are provided as Attachment 3.2.A. The attached payment rates are effective as of October 1, 2001.

The following is a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

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- The month and year of the local market rate survey(s): May 2001 (§98.43(b)(2))
- How the payment rates are adequate to ensure equal access based on the results of the above noted local market rate survey (i.e., the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

The payment rates in Attachment 3.2.A are applicable only to the following components of the Child Care Assistance Program: Transitional Child Care (former TANF clients, a TANF family when that family is a family of one TANF child and the Child Care Certificate Program (low-income working non-TANF clients). The payment rate methodology is derived from a survey conducted in 1991 according to the methodology previously described in 45 CFR Part 255. The Lead Agency recently completed a rate survey in May 2001 and is currently analyzing the data collected in order to determine new payment rates to coincide with the states' new uniform child care subsidy program schedule to take effect on January 1, 2002. An amendment to this Plan will be submitted to address this information.

The payment rates for "providers exempt from licensing" were determined by surveying approximately 1,500 or 50% of the case files. Relatives and in-home providers are included in this category.

• Additional facts that the Lead Agency relies on to determine that its payment rates ensure equal access include: (§98.43(d))

#### None at this time.

• If the payment rates do <u>not</u> reflect individual rates for the <u>full</u> range of providers -- centerbased, group home, family and in-home care -- explain how the choice of the full range of providers is made available to parents:

### Not Applicable

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# **Section 3.3 - Eligibility Criteria for Child Care:**

By statute, all eligible children must be under the age of 13 and reside with a family whose income does not exceed 85% of the State Median Income (SMI) for a family of the same size and whose parent(s) are working or attending a job training or educational program or who receive or need to receive protective services. (658E(c)(3)(B), 658P(3), §98.20(a))

3.3.1 <u>Complete column (a) in the matrix below.</u> Complete Column (b) <u>ONLY IF</u> the Lead Agency is using income eligibility limits <u>lower</u> than 85% of the SMI).

IF APPLICABLE

Family Size	(a) 85% of State Median Income (SMI) (\$/month)	(b) Income Level, lower than 85% SMI, if used to limit eligibility (\$/month)
1	\$2,783	\$2,455
2	\$3,639	\$3,211
3	\$4,495	\$3,966
4	\$5,351	\$4,721
5	\$6,207	\$5,477

#### Column (b) is calculated at 75% of the Connecticut SMI level as of July 2001.

- 3.3.2 How does the Lead Agency define "income" for the purposes of eligibility? Is any income deducted or excluded from total family income, for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments? Is the income of all family members included, or is the income of certain family members living in the household excluded? Please describe and/or include information as Attachment 3.3.2 A. (§§98.16(g)(5), 98.20(b))
- 3.3.3 Has the Lead Agency established additional eligibility conditions or priority rules, for example, income limits that vary in different parts of the State, special eligibility for families receiving TANF, or eligibility that differs for families that include a child with special needs? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))
  - (x) No
  - ( ) Yes, and the additional eligibility criteria are: (<u>Terms must be defined in Appendix 2</u>)

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3.3.4	eligib prote	the Lead Agency elected to waive, on a case-by-case basis, the fee and income bility requirements for cases in which children receive, or need to receive, ctive services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), 20(a)(3)(ii)(A))
	( ) (x) ( )	Not Applicable, CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.  No Yes
3.3.5	physi	the Lead Agency allow child care for children age 13 and above who are cally and/or mentally incapable of self-care? (Physical and mental incapacity then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))
	( ) (x)	No Yes, and the upper age is <u>19</u> .
3.3.6		the Lead Agency allow child care for children age 13 and above whom are rourt supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii)
	( ) (x)	No Yes, and the upper age is <u>19</u> .
3.3.7	whos	the State choose to provide CCDF-funded child care to children in foster care e foster care parents are <u>not</u> working, or who are <u>not</u> in education/training ities? (§§98.20(a)(3)(ii), 98.16(f)(7))
	( )	Yes. ( <b>NOTE</b> : This means that for CCDF purposes the State considers these children to be in protective services.)
	(x)	No.
3.3.8		the State choose to provide respite child care to children in protective services? $8.16(f)(7)$ , $98.20(a)(3)(ii)(A) & (B)$ )
	( ) (x)	Yes. No.

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#### **Section 3.4 Priorities for Children:**

3.4.1 The following describes the priorities for serving CCDF-eligible children including how statutorily required priority is given to children of families with very low family income and children with special needs: (Terms must be defined in Appendix 2) (658E(c)(3)(B))

The Lead Agency follows, per state regulations, the following priorities, when the program is closed:

- 1. Teen parents completing high school.
- 2. Pregnant women in substance abuse treatment programs.
- 3. Working parents who require care for a special needs child or whose gross annual family income is below 25 percent of the state median income.
- 4. Working parents who require care for a child receiving protective services or foster care, or who have multiple children who need child care.
- 5. Other eligible applicants who are working.
- 6. Parent(s) attending job training with priority in this group given in the following order:
  - parents who require care for a special needs child whose gross annual family income is below 25 percent of the state median income.
  - parents who require care for a child receiving protective services or foster care, or who have multiple children who need child care.
  - other eligible applicants who are attending a job training or educational programs.
- 3.4.2 The following describes how CCDF funds will be used to meet the needs of families who are receiving Temporary Assistance for Needy Families (TANF), families who are attempting through work activities to transition off of TANF, and families that are at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

The Lead Agency will provide child care assistance to all TANF families participating in approved training programs and/or employed opportunities (will use the TANF Block Grant) and a TANF family when that family is a family of one TANF child (will use CCDF Block Grant).

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The Lead Agency eligibility workers will provide child care information packets and refer all prospective families requiring child care financial assistance to the Child Care Assistance Program (CCAP) 1-800 phone line and/or the Child Care INFOLINE for information on choosing a child care provider. CCAP staff will send applications to prospective clients, determine eligibility by viewing the case file on-line, and issue a child care certificate that the family can bring to qualified child care settings in CT.

#### Section 3.5 - Sliding Fee Scale for Child Care Services:

3.5.1 A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on <u>income and the size of the family</u>. A copy of this sliding fee scale for child care services and an explanation of how it works are provided as Attachment 3.5.1A.

Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

- ( ) No.
- (x) Yes, and the following describes any additional factors that will be used to determine a family's contribution including, but not limited to, a maximum amount (family cap), number of children in care, and/or whether care is full or part-time:

The family contribution is determined for the family regardless of the number of children in care.

- 3.5.2 Is the same sliding fee scale provided in the attachment in response to question 3.5.1 above in use in <u>all</u> parts of the State? (658E(c)(3)(B))
  - (x) Yes() No, and other scale(s) are provided as Attachment \_\_\_\_\_.
- 3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: \$1,180

The Lead Agency must elect ONE of these options:

- ( ) ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
- (x) ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- () SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. A description of these families is:

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3.5.4 Does the Lead Agency have a policy, which prohibits child care providers from charging families any unsubsidized portion of the providers' normal fees (in addition to the contributions discussed in 3.5.1)? (§98.43(b)(3))

- (x) No
- ( ) Yes, please describe:
- 3.5.5 The following is an explanation of how the copayments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

All families with earnings are required to pay a range from 2% to 10% of their annual/monthly gross income. If there are more than one child, the family is not required to pay any additional fee. The required Connecticut copayment follows national studies indicating the level families can pay at various income levels.

# **Section 3.6 - Certificate Payment System:**

A child care certificate means a certificate, check, or other disbursement that is issued by the Lead Agency directly to a parent who may use it only to pay for child care services from a variety of providers (including center-based, group home, family and in-home child care), or, if required, as a deposit for services. (658E(c)(2)(A)), 658P(2), §§98.2, 98.16(k), 98.30(c)(3) & (e)(1))

Describe the overall child care certificate payment process, including, at a minimum:

3.6.1 A description of the form of the certificate: (§98.16(k))

The child care certificate is a document authorizing monthly payments for specific child care services. It names the parent(s), the child(ren) to receive child care and the child care provider. The certificate also states the amount of the state and parent share. The Lead Agency maintains the original certificate with copies to the parent and the provider.

A description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to the choice of provider; (658E(c)(2)(A)(iii), 658P(2), §§98.2, 98.30(c)(4) & (e)(1) & (2))

Parents are informed that the certificate can be used at any appropriate (as defined in state regulations) child care setting they choose as long as the parent remains eligible for child care assistance. The certificate can be used at multiple child care settings. A Certificate of Eligibility can be provided to parents who have not selected a child care provider. Parents can then take their certificate to a provider of their choice.

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Parents are provided information on the certificate program by, but not limited to, the Lead Agency staff, Child Care Assistance Program, and the Child Care INFOLINE project, the statewide resource and referral service funded by the Lead Agency that assists parents with choosing child care.

3.6.3 If the Lead Agency is also providing child care services through grants and contracts, explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (§98.30(a) & (b))

Contractors are required, as a condition of funding, to advise all parents with whom the programs have contact, about the availability of the child care certificate.

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#### **PART 4 - PROCESSES WITH PARENTS**

- 4.1 The following describes the process for a family to apply/receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). If the process varies for families based on eligibility category, for instance, TANF versus non-TANF, please describe. The description should include:
  - How parents are informed of the availability of child care services and of available child care options;
  - Where/how applications are made;
  - Who makes the eligibility determination;
  - How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4; and
  - Length of eligibility including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs.

Parents are informed about child care financial assistance by the Lead Agency regional office staff and other contracted entities. Informational brochures, direct conversation, phone discussion and strategies developed by community based organizations serving similar clients, serve as the basic communication strategies. Families are informed about the Child Care INFOLINE service to discuss child care options and what constitutes good child care. All of the organizations identified in Section 2.1 inform their respective constituents, as appropriate.

Applications are provided at various community and municipal settings and mailed to potential eligible families. Families are required to submit their applications, which include necessary verifications, by mail or schedule appointments when necessary. Eligibility determination is completed by the Lead Agency's contractor for the Child Care Assistance Program (CCAP). CCAP staff can travel to meet with families if necessary. Bilingual and bicultural staff assist where possible. Eligibility is primarily granted for six months or on a month-to-month basis, if warranted.

4.2 The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. (658E(c)(2)(C), §98.32))

Parental complaints concerning due process for the Child Care Assistance Program is handled by the Lead Agency's Office of Legal Counsel, Regulations and Administrative Hearings. The Lead Agency's contractor for the Child Care Assistance Program has designed a grievance/mediation process for parents and child care providers as a first step prior to a formal fair hearing by the Lead Agency.

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Complaints concerning other components of the CCDF program are filed directly with the Lead Agency. The Lead Agency requires all contracted program components to maintain a file of complaints and report as necessary.

Complaints concerning licensed child care providers are reported to the either the state Department of Public Health (licensing issues such as staff ratios or illegal operation) or the state Department of Children and Families (abuse and neglect issues). Parents and providers are advised to contact those agencies for appropriate information.

4.3 The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))

Connecticut sate laws guarantee unlimited access for parents at all licensed child care settings, including those parents eligible for CCDF financial assistance.

Child care settings that are exempt from licensing requirements are also informed that they must allow parents unlimited access to their children.

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care:

- "appropriate child care":
- "reasonable distance":
- "unsuitability of informal child care":
- "affordable child care arrangements":

(NOTE: The TANF agency, not the Child Care Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. The TANF agency that established these criteria or definitions is: **CT Department of Social Services, which** is also the Lead Agency for CCDF. The definitions are included in Attachment 4.4.A.

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# PART 5 - ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE

- 5.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities.
  - The following describes the activities funded to improve the quality of care for infants/toddlers and identifies the entity(ies) providing them:

The Lead Agency will contract with state supported child care centers to provide comprehensive services to eligible families. The state supported centers work with the Lead Agency to meet the community child care needs for all children, including infant/toddlers.

• The following describes child care resource and referral activities funded and identifies the entity(ies) providing them:

The Lead Agency will contract with the United Way of CT's Child Care INFOLINE project, which provides statewide resource and referral services. This project provides consumer education, community seminars, direct counseling and education service for parents seeking child care assistance, and also maintains a provider data base that includes information concerning fees, openings, etc. Staff develop and distribute relevant brochures and work with the Lead Agency to increase the child care capacity.

• The following describes school-aged child care activities funded and identifies the entity (ies) providing them.

The Lead Agency will contract with state supported school-age child care programs to provide comprehensive services as recommended by the National School-age Child Care Alliance. The state supported school-age programs work with the Lead Agency to meet the community child care needs for all children, including school-age children. The Lead Agency will also consult with the CT School-age Child Care Alliance to expand and enhance educational and support opportunities for their organization members.

The law requires that <u>not less than 4%</u> of the CCDF be set-aside for quality activities (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51, 98.16(h)). The Lead Agency <u>estimates</u> that the following amount and percentage will be used for the quality activities (not including earmarked funds):

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5.3 Check either "Yes" or "No" for each activity listed to indicate which activities the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658E(c)(3)(B), §§98.13(a), 98.16(h))

Yes No	
<u>X</u>	a. comprehensive consumer education; (§98.51(a)(1)(i))
<u>X</u>	b. grants or loans to providers to assist in meeting State and local
	standards; (§98.51(a)(2)(ii))
<u>x</u>	c. improving the monitoring of compliance with licensing and regulatory
	requirements; (§98.51(a)(2)(iii))
<u>x</u>	d. training, education, and technical assistance; (§98.51(a)(2)(iv))
<u>x</u>	e. improving salaries and other compensation for child care providers;
	$(\S98.51(a)(2)(v))$
<u>x</u>	f. other quality activities that increase parental choice, and improve the
	quality and availability of child care. (§98.51(a)(1)(ii) & (ii))

- Describe each activity that is checked "Yes" above and identify the entity(ies) providing them.
  - **a. comprehensive consumer education -** includes a variety of strategies such as: funding the United Way of CT Child Care INFOLINE which is the statewide resource and referral agency to counsel parents about choosing child care and provide community forums to parents and providers; development and distribution of educational brochures, videos, public service announcements; collaboration with other agencies identified in Section 2.1 and organizations that have similar target populations; coordination with statewide and local media; distribution of child care informational packets at the Lead Agency regional offices and the CT Department of Labor, which is coordinating the state's welfare-to-work project.

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- **b. grants or loans to providers to assist in meeting State and local standards** The Lead Agency established, per state legislation, the Child Care Facilities Loan Fund (CCFLF) that provides financing opportunities for child care facilities. The Lead Agency has delegated the administration for CCFLF to the CT Health and Educational Facilities Authority (CHEFA). CHEFA administers three loan programs: 1. A tax-exempt bonding program for non-profit child care facilities for construction, renovation or expansion costs; 2. a loan guarantee program for capital and non-capital loans; and 3. a small revolving loan program for non-capital loans.
- **c.** monitoring of compliance with licensing and regulatory requirements The Lead Agency will continue to fund additional child care licensing and enforcement personnel at the state Department of Public Health (DPH).
- **d. training and technical assistance** The Lead Agency will continue to support a variety of activities such as: the CT Community Technical Colleges Systems' *CT Charts a Course* project, a comprehensive early caregiver career development system which includes a scholarship program for income eligible providers; develop a comprehensive program targeted to kith and kin providers; develop a Recognition Award program for early care givers; a statewide Accreditation Facilitation Project; the University of Connecticut Cooperative Extension Systems' quarterly newsletter entitled, *All Children Considered*, which is distributed to all licensed and informal child care providers; the Child Health and Development Institutes' training program in developmentally appropriate curriculum to caregivers on basic child health and development issues; technical assistance to child care advocacy and member organizations.
- **e. compensation for child care providers** The Lead Agency provides compensation through scholarship assistance offered by the *CT Charts a Course project* and supports compensation through its contracted child care center programs and its Child Care Assistance Program and will pilot a new child care apprenticeship program with the CT Department of Labor.
- f. other quality activities that increase parental choice, and improve the quality and availability of child care please refer to item (b) concerning the Child care Facilities Loan Fund. In addition, the Lead Agency contracts with the United Way of CT Child Care INFOLINE project to conduct a recruitment program to expand the number of licensed family child care providers. The Lead Agency is a partner with the State Department of Education to implement the state's school readiness initiative that expands opportunities for three and four year olds in selected communities throughout Connecticut. The school readiness project also assists child care providers to enhance program services (nutrition, health care, parent education, literacy, etc) similar to Head Start standards, for children and families. The Lead Agency is a partner with the Healthy Child Care CT project to coordinate health and mental health oriented programs and services for child care providers and consumers. The Lead Agency is a partner with the CT Department of Education and

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the CT Commission of National Community Service to support an adult and child literacy program at five child care facilities.

- 5.5 Is any entity identified in sections 5.1 or 5.4 a non-governmental entity?
  - ( ) No.
  - (x) Yes, the following entities named in this Part are non-governmental:

Child Health and Development Institute
United Way of CT Child Care INFOLINE
CT School-age Child Care Alliance
Various private and non-profit child care and school-age centers

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# PART 6 - HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(ONLY THE 50 STATES AND THE DISTRICT OF COLUMBIA COMPLETE PART 6. ONLY TERRITORIES COMPLETE PART 7.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: http://nrc.uchsc.edu/

# Section 6.1 - Health and Safety Requirements for Center-Based Providers $(658E(c)(2)(F), \S 98.41, \S 98.16(j))$

- Are all <u>center-based</u> providers paid with CCDF funds subject to licensing under State law which is reflected in the NRCHSCC's compilation referenced above? If:
  - ( ) YES, answer 6.1.2 and proceed to 6.2.
  - (x) NO, answer 6.1.2 and 6.1.3.
- Have center licensing requirements as relates to staff-child ratios, group size, or staff training been modified since approval of the last State Plan? (§98.41(a)(2) & (3))
  - () YES
  - (x) NO
- 6.1.3 For that center-based care which is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

In the CT Child Care Assistance Program (CCAP), the parent furnishes the child care center with information on forms (Provider/Parent Agreement) received from the Lead Agency's contractor to administer CCAP. The provider completes and signs the Provider/Parent Agreement attesting to the following: local town code enforcement and minimum health and safety standards will be met, including the availability of a working telephone, fire extinguisher, and smoke alarm; the absence of a conviction for a felony, violent crime and/or a protective services record for staff; proof that all children in care are age

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appropriately immunized against diptheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, haemophilus influenza type B, hepatitis and varicella (chicken pox). The provider assures that their staff meet similar staff training requirements for licensed child care centers.

# Section 6.2 - Health and Safety Requirements for Group Home Providers $(658E(c)(2)(F), \S 98.41, 98.16(j))$

- Are all group home providers paid with CCDF funds subject to licensing under State law, which is reflected in the NRCHSCC's compilation referenced above? If:
  - ( ) YES, answer 6.2.2 and proceed to 6.3.
  - (x) NO, answer 6.2.2 and 6.2.3.
- 6.2.2 Have group home licensing requirements as relates to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))
  - () YES
  - (x) NO
- 6.2.3 For that group home care which is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

In the CT Child Care Assistance Program (CCAP), the parent furnishes the group home with information on forms (Provider/Parent Agreement) received from the Lead Agency's contractor to administer CCAP. The provider completes and signs the Provider/Parent Agreement attesting to the following: local town code enforcement and minimum health and safety standards will be met, including the availability of a working telephone, fire extinguisher, and smoke alarm; the absence of a conviction for a felony, violent crime and/or a protective services record for staff; proof that all children in care are age appropriately immunized against diptheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, haemophilus influenza type B, hepatitis and varicella (chicken pox). The provider assures that their staff meet similar staff training requirements for licensed group homes.

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# <u>Section 6.3 - Health and Safety Requirements for Family Providers</u> (658E(c)(2)(F), §§98.41, 98.16(j))

- 6.3.1 Are all <u>family home</u> child care providers paid with CCDF funds subject to licensing under State law which is reflected in the NRCHSCC's compilation referenced above? If:
  - ( ) YES, answer 6.3.2 and proceed to 6.4.
  - (x) NO, answer 6.3.2 and 6.3.3.
- 6.3.2 Have family home child care provider requirements as relates to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))
  - () YES
  - (x) NO
- 6.3.3 For that family home care which is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

In the CT Child Care Assistance Program (CCAP), the parent furnishes the family child care home with information on forms (Provider/Parent Agreement) received from the Lead Agency's contractor to administer CCAP. The provider completes and signs the Provider/Parent Agreement attesting to the following: local town code enforcement and minimum health and safety standards will be met, including the availability of a working telephone, fire extinguisher, and smoke alarm; the absence of a conviction for a felony, violent crime and/or a protective services record for staff; proof that all children in care are age appropriately immunized against diptheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, haemophilus influenza type B, hepatitis and varicella (chicken pox). The provider assures that their staff meet similar staff training requirements for licensed family child care homes.

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- 6.4.1 Are all <u>in-home</u> child care providers paid with CCDF funds subject to licensing under State law which is reflected in the NRCHSCC's compilation referenced above? If:
  - ( ) YES, answer 6.4.2 and proceed to 6.5.
  - (x) NO, answer 6.4.2 and 6.4.3.
- 6.4.2 Have in-home health and safety requirements as relates to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))
  - () YES
  - (x) NO
- 6.4.3 For that in-home care which is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
  - The prevention and control of infectious disease (including age-appropriate immunizations)
  - Building and physical premises safety
  - Health and safety training

In the CT Child Care Assistance Program (CCAP), the parent furnishes the inhome provider with information on forms (Provider/Parent Agreement) received from the Lead Agency's contractor to administer CCAP. The provider completes and signs the Provider/Parent Agreement attesting to the following: local town code enforcement and minimum health and safety standards will be met, including the availability of a working telephone, fire extinguisher, and smoke alarm; the absence of a conviction for a felony, violent crime and/or a protective services record for staff; proof that all children in care are age appropriately immunized against diptheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, haemophilus influenza type B, hepatitis and varicella (chicken pox). The Lead Agency provides educational and training materials on health and safety to in-home providers.

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# <u>Section 6.5 - Exemptions to Health and Safety Requirements</u>

At State option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings who live in a separate residence from the child in care, may be exempted from health and safety requirements (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency policy regarding these relative providers:

- (x) All relative providers are subject to the same requirements as described in sections 6.1 6.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.
- ( ) All relative providers are exempt from <u>all</u> health and safety requirements.
- Some or all relative providers are subject to <u>different</u> health and safety requirements from those described in sections 6.1 6.4. The following describes those different requirements and identifies which relatives they apply to:

### **Section 6.6 - Enforcement of Health and Safety Requirements**

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively <u>enforced</u>:

- Are child care providers subject to routine unannounced visits?
  - ( ) No
  - (x) Yes, and the following describes the providers subject to unannounced visits and the frequency of those visits.

The Department of Public Health is the agency with statutory authority to enforce licensing requirements applicable to child day care centers, group day care homes and family day care homes in Connecticut.

At least every two years, unannounced site visits, inspections or investigations of licensed child day care centers or group day care homes are conducted by licensing enforcement specialists. New programs are inspected prior to initial licensure. Site visits are required prior to licensure for all family day care home applicants. Thereafter, the Department is required to make unannounced visits to "at least thirty three and one third percent" (33 1/3%) of the licensed family day care homes each year.

Any inspection conducted by the Department shall include an inspection for evident sources of lead poisoning. The Department investigates all complaints received on licensed child day care facilities and facilities alleged to be operating illegally without a license. The Department has statutory authority to refuse to license, suspend or revoke an existing license or take any other action against a license as set forth in regulations.

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DPH provides information to parents and shares information concerning the results of enforcement visits when requested.

- Are child care providers subject to background checks?
  - ( ) No
  - (x) Yes, and the following describes the providers subject to background checks.

The Department of Public Health is the agency with statutory authority to assure that all licensed child care providers (child day centers, group day care homes and family day care homes) and appropriate staff receive appropriate background checks.

The Lead Agency assures that providers exempt from licensing, specifically those providers who are not relatives and provide care in the child's home, receive appropriate background checks. In addition the Lead Agency can require background checks to those providers exempt from licensing if there is "a reason to believe that a conviction has occurred".

- Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)
  - (x) No
  - (x) Yes, and the following describes the State's reporting requirements and how such injuries are tracked (if applicable).

Yes - Family Day Care Homes must notify, within 24 hours, the Department of Public Health if a child death occurs due to a contagious disease while at the facility and when an any injury to a child that results in the child being admitted to a hospital.

No - Child Day Centers and Group Day Care Homes do not have specific reporting requirement unless it is deemed a report of abuse, neglect, or reportable disease and laboratory finding.

Other methods used to ensure health and safety requirements are effectively enforced:

None at this time.

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# **Section 6.7 – Exemptions from Immunization Requirements**

The State assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

The State exempts the following children from immunization (check all that apply):
\_\_\_\_ Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
\_\_\_ Children who receive care in their own homes.
\_\_ Children whose parents object to immunization on religious grounds.
\_\_ Children whose medical condition contraindicates immunization.

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# **APPENDIX 1 -- PROGRAM ASSURANCES AND CERTIFICATIONS**

The Lead Agency, named in Part 1 of this Plan, assures that:

- upon approval, it will have in effect a program which complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii)
- with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice from among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d)).
- that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))

### The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))
- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))

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- (3) it will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers that provide services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

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# **APPENDIX 2 - ELIGIBILITY AND PRIORITY TERMINOLOGY:**

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must define the following terms. (658P, 658E(c)(3)(B))

- (1) special needs child a child under 19 years of age who cannot care for him/herself and requires extra supervision, care or instruction in the child care setting as documented by the Individualized Education Plan, Individualized Family Service Plan or by an appropriate professional referral; and whose special needs derive from one or more conditions including, but not limited to: physical or mental disability serious emotional maladjustment; a recognized high risk of physical or mental disability; a delay in cognitive development, physical development, speech and language development including vision and hearing, psychosocial development, or self-help skills.
- (2) physical or mental incapacity see #1 special needs child.
- (3) attending (a job training or educational program) cooperating with program rules and assignments and participating in scheduled classes or sessions, at a rate which the educational or training institution considers at least half-time, except when the parent or child is ill as approved by the CT Department of Labor.
- (4) job training and educational program completing high school or receiving occupational instruction, which will lead to or is required to retain a job.
- (5) residing with living with, including taking meals and sleeping in the same home.
- (6) working any ongoing employment for pay, either full-time or part-time regardless of the number of hours, at one or more jobs.
- (7) **protective services** a family service plan for safeguarding a child whom is considered by the state's child protective service agency to be at risk of abuse or neglect.
- (8) very low income under 25% of the state's median income, which approximates 100% of the federal poverty standard.
- (9) in loco parentis in the place of a parent, for example, a foster parent, a guardian, a relative, or a friend with whom the child resides. The term describes someone who provides care and supervision like a parent but without going through the formalities of legal adoption.

Additional terminology related to conditions of eligibility or priority established by the Lead Agency: -

(a) **parent** - a parent by blood, marriage or adoption, or a person standing in loco parentis.

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- (b) **family** The parent, parent's spouse, and their children who reside together, except that a foster child or a TANF child residing with a person acting <u>in loco parentis</u> shall be considered a family of one
- (c) **low income** under 75% of the state's median income.
- (d) **teenage parent** a parent under the age of 20 years.
- (e) **high school completion program** a program which will lead to receiving a high school diploma or General Equivalency Diploma certificate.
- (f) **foster parent** the licensed relative or otherwise approved individual(s) providing full-time care for a child placed in his/her home by the states foster care agency.
- (g) **infant/toddler** a child under 2 years of age if cared in a home setting or under 3 years if cared in a day care center or group home.
- (h) **preschool child** a child older than an infant/toddler but not yet in school full-time, including a child attending kindergarten half day.
- (i) a school age child a child attending school full-time during the school year, including full-time kindergarten.
- (i) part time child care less than but not equal to 35 hours per week.
- (k) **family share** the percentage of the family's gross income, which the parent(s) must pay directly to the provider as his/her contribution toward the approved cost of care.
- (l) **state share or subsidy** the difference between the family share and the actual cost of child care or established market rate, whichever is lower.
- (m) **residency** for eligibility purposes, establishment of living and housing arrangements within the state of Connecticut.
- (n) **child care need for eligibility** for eligibility purposes need must be due to parent(s) working or attending a job training or educational program.
- (o) **approval of child care provider** for eligibility purposes, the Department must approve the child care provider (regulated or exempt) to insure minimal health and safety requirements have been met.

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#### CHILD CARE AND DEVELOPMENT FUND

#### **ATTACHMENTS**

#### PART 2 DEVELOPING THE CHILD CARE PROGRAM

Section 2.1A - Principles, Objectives and Strategies

Section 2.1B - Collaboration Efforts

Section 2.2A - Public Hearing Notice

#### PART 3 CHILD CARE SERVICES OFFERED

Section 3.2A - Payment Rates

Section 3.3.2A - Income Guidelines

Section 3.5.1A - Sliding Fee Schedule

#### PART 4 PROCESSES WITH PARENTS

Section 4.4A - TANF Definitions and Criteria

#### **SECTION 2.1A**

#### CONNECTICUT

#### PRINCIPLES, OBJECTIVES AND STRATEGIES

#### A. GUIDING PRINCIPLES

The following guiding principles were adopted in 1990 when we completed the first CCDF federal plan. Numerous child care providers, advocates and other constituents participated in that process. While not a requirement for federal plan approval, we have always included this information. We have not changed these principles since adopted in 1990. We, however, have added a principle that addresses the current crisis regarding early care and education workforce issues.

The Connecticut Child Care and Early Education system will:

- offer families a broad range of accessible, affordable, comprehensive and quality child care services.
- allow families to choose the most appropriate child care service and be informed about how to locate and evaluate child care opportunities.
- allow for a smooth transition when families change child care services.
- provide appropriate services and training opportunities for caregivers, including caregivers exempt from licensing.
- ensure that basic health and safety standards are maintained by caregivers.
- ensure that all available federal funds are maximized and combined into one universal child care program to support targeted families and children.
- establish eligibility guidelines which address income and child care need.
- establish a payment system, which addresses family co-payments, provider payments differentiated by licensed and unlicensed caregivers, and age of child.
- ensure the coordination and on-going planning for all local, state and federal early childhood services and programs.
- establish various incentive and cost models to address teacher turnover and compensation levels that will expand and retain the number of early education professionals.

#### B. SERVICE OBJECTIVES

DSS proposes the following service objectives that support the federal CCDF goals. The service objectives remain essentially the same as included in the prior two-year federal plan. However, we have added a specific objective to address the early care and education workforce issue.

- **increase child care capacity** the establishment, expansion or recruitment of new child care facilities/providers and support for existing child care providers in order to expand the number of child care "arrangements" available to families seeking child care assistance
- increase financial assistance to families in order to make child care affordable the efficient provision of affordable child care subsidies (certificates or vouchers) and/or contracts to early childhood programs in order to assist low income working families and families transitioning off public assistance
- enhance quality and school readiness services the establishment of critical support services to enhance developmentally appropriate educational opportunities for children and professional opportunities for caregivers
- **enhance health and safety provisions** the establishment of policies and support services to assure children have access to healthy and safe child care settings
- expand linkages and leveraging of available funds the coordination of child care and early childhood education services among state agencies, state and local community organizations, businesses and child care providers
- increase number of early care and education professionals and promote retention the establishment of incentive and cost models to increase and retain early education teachers in order to address the high turnover rate; the collection of current data to better educate policy makers

#### C. SERVICE STRATEGIES

DSS proposes the following strategies to address the service objectives:

#### **Increase Child Care Capacity**

The state and federal welfare reform initiative will continue to require families with children to find employment or participate in employment activities. A recent analysis completed by the State Department of Education, in collaboration with DSS, identified the need for additional capacity in several communities that participate in Connecticut's School Readiness initiative. The supply of child care providers and/or child care spaces must continue to expand in order to meet this demand.

#### Proposed strategies include:

- continue to educate the business community about **tax credits** that can be accessed for establishing new child care facilities and subsidizing employee child care needs.
- continue to coordinate the **Child Care Facilities Loan Fund** program to assist with the new construction, acquisition or expansion of child care facilities.
- continue to convene caregiver recruitment sessions throughout the state to **increase the number of family day care home providers**.
- coordinate with local community, public housing and economic development projects to include child care as a community development project and explore micro-enterprise and small business funding opportunities.
- educate cash assistance recipients about child care as a career opportunity and expand child care occupational training programs.
- expand linkages with Head Start and other early care and education programs to coordinate various funding streams that can finance full-day, full-year programs.
- expand programs and spaces for 3 and 4 year old children through the state's School Readiness program.
- support kith and kin providers with necessary educational and training opportunities and link them with the formal child care community.
- expand linkages with Schools of the 21<sup>st</sup> Century programs that provide services for school-age children.

#### Increase Financial Assistance to Families in order to Make Child Care Affordable

The ability for families to afford the fees charged by caregivers is a major factor that continues to determine the selection of certain caregivers. The adoption of new uniform regulations for the Child Care Assistance Program with expected new payment rate provisions (effective January 1, 2002) should greatly assist this objective.

#### Proposed strategies include:

- implement a uniform child care subsidy program.
- expand **child care subsidies for low-income working families** with earnings up to 75% of the state median income level and with children under the age of 13 (19 if they have special needs).

- increase the number of **families transitioning from cash assistance to work** who use publicly funded child care including the Child Care Assistance Program, state-funded centers and School Readiness programs.
- continue to administer a **school-age child care contract program** targeting available state and federal funds to eligible organizations that provide before and after school child care at school and community settings for working families earning less than 75% of the state median income level.
- continue to administer a **child care center contract program** directing available state and federal funds to eligible child care centers that provide **preschool**, **infant/toddler**, **and school-age** services. Activities funded by this initiative are designed to provide high quality, safe, age-appropriate environments and a full range of social, educational, recreational and nutritional services to children and support services to their families. Enrollment will be targeted to *families earning less than 75% of the state median income level*.
- encourage families to pursue child support
- continue jointly to administer with the CT Department of Education, the state's **School Readiness contract program** to selected communities that will target *families earning less than 75% of the state median income level*.

#### **Enhance Quality and School Readiness Services**

CCDF funds have supported quality initiatives since its inception in 1990 and currently supports several thousand children (ages 13 and under) in comprehensive, quality early learning and school readiness programs.

#### Proposed strategies include:

- continue to provide consumer education and information materials that educate current and potential child care consumers
- continue to support the state's **child care resource and referral** program, Child Care INFOLINE, operated by the United Way of CT, to provide the following services:
  - counseling and consumer information
  - data on the types of child care opportunities, fees, special service considerations, etc
  - technical assistance and information for child care providers
  - community education and collaboration activities

- continue to provide **financial assistance**, **technical support and training opportunities** for new and existing child care providers (emphasis on providers working with infant/toddlers and school-age children) by working directly with the Child Health and Development Institute of CT and other private and public organizations.
- continue to establish strategies **effectively to use the media** to provide information and education to parents and child care professionals.
- continue to provide financial support to the **Connecticut Charts-A-Course (CCAC) initiative**, a voluntary professional development system for early caregivers operated by the Connecticut Community Colleges System.
- continue to provide financial support to the statewide program to assist caregivers to achieve accreditation status by appropriate national organizations, operated by the Connecticut Community Colleges System and the Hartford Association for the Education of Young Children.
- continue to support **quality enhancements for the priority school communities** as defined in the state's school readiness legislation in collaboration with the State Department of Education.
- continue to support the design, development and distribution of a **quarterly newsletter** that is distributed to all child care providers, libraries, legislators, schools, etc. an operated by the University of Connecticut Cooperative Extension System
- continue to implement **background checks for informal child care providers** seeking approval to participate in the Child Care Assistance Program in collaboration with the departments of Public Safety and Children and Families.
- develop and implement a strategic plan that address the educational and financial resources needed by relative and other license-exempt providers.
- develop and implement a professional recognition award program for early care and education providers in collaboration with the CT Charts a Course career development system and selected child care provider membership organizations.

#### **Enhance Health and Safety Provisions**

DSS must assure that procedures are in effect to ensure that child care providers that provide services for which assistance is provided under the CCDF comply with all applicable State or local health and safety requirements.

#### Proposed strategies include:

• continue to fund child care licensing personnel at the Connecticut Department of Public Health (DPH) to monitor child care facilities. We encourage you to access

the web sites for DPH and the National Resource Center for Health and Safety in Child Care to review the Connecticut licensing and regulatory requirements.

- continue to work with the Departments of Public Safety (coordinate criminal background checks) and Children and Families (coordinate child abuse and neglect checks) for child care providers exempt from licensing requirements.
- continue to implement health and safety provisions for child care providers exempt from licensing requirements who apply for assistance from the Child Care Assistance Program.
- continue to educate child care providers exempt from licensing requirements on various health and safety provisions through various mediums

#### **Expand Linkages and Leveraging of Available Funds**

As the child care services lead agency, DSS is responsible for many coordination and planning activities.

#### Proposed strategies include:

- continue to coordinate efforts with the Connecticut Head Start State Collaboration office, Head Start Directors Association, State Directors Forum, Connecticut Child Day Care Council, Child Care Legislative Task Force, Birth to Three Interagency Coordinating Council, Healthy Child Care Connecticut Project, HUSKY Managed Care Task Force, child care provider memberships groups, CT Voices for Children, CT Association for Human Services, etc.
- continue to coordinate recruitment efforts with the United Way of CT Child Care INFOLINE and the Department of Public Health child care licensing staff and with several state and local organizations to increase the supply of child care providers.
- continue to establish linkages with employment and training organizations and businesses to provide necessary supports for their employees.
- continue to develop strategies to link state and local agencies with early childhood programs for children with special needs, in collaboration with the Connecticut Department of Mental Retardation and the Connecticut Department of Education Special Education Bureau.
- continue to coordinate with the Department of Children and Families and other appropriate state and local agencies to create strategies around family support initiatives.
- continue to coordinate efforts with the various DSS units: Family Support (services to TANF eligible families), Child Support (encourage single mothers to seek financial assistance from the absent parent), Elderly Services (coordinate intergenerational programs

and educate and train grandparents who are child care providers) and Medicaid (coordinate activities that assure all children in child care have access to health care)

#### Increase the Number of Early Care and Education Professionals and Promote Retention

From anecdotal and some limited study data, it is clear that Connecticut, like the nation as a whole, is experiencing significant turnover in child care staffing. We know that turnover results both from "program hopping" and from flight of staff from the field altogether, but the extent of this phenomenon and the pattern of it are not so clear. Likewise, the causes may include depressed levels of compensation and benefits, working conditions, advancement opportunities and inadequate recruitment, along with many competing opportunities available in the larger economy, but the magnitude of those factors is unknown. We do know that the child care market cannot remedy the low wage scale for staff merely through family fees, but rather requires targeted funding mechanisms.

#### **Proposed strategies include:**

- study the extent and nature of the turnover of child care staff in the state
- research the credentials and pattern of compensation of caregivers
- develop initiatives to supplement compensation and benefits for caregivers in connection with levels of professional development
- implement a program to compensate caregivers and programs for increased professional development and accreditation

#### SECTION 2.1B

#### COLLABORATION EFFORTS

#### **Department of Education**

#### DSS and SDE:

- 1. Are represented on the Connecticut Birth to Three State Interagency Coordinating Council, which is forum for policy review and advocacy on issues regarding young children with disabilities.
- 2. Are represented on the Child Day Care Council, which is a forum for policy review and advocacy on child care issues.
- 3. Are represented on the Healthy Child Care CT project, which is a forum for policy review and advocacy on health issues, including behavioral health, mental health and issues of child care for children with disabilities and other special needs.
- 4. Are represented on the Head Start Advisory Committee, which advises the Commissioner of Education on state Head Start funding and programming.
- 5. Are represented on an ad hoc forum of federal and state officials and providers to discuss Head Start, child care and education issues.
- 6. Are represented on the Board of Directors of the Connecticut Charts a Course project, which has developed and operates the state's professional development system for child care providers.

#### DSS and SDE:

- 1. Jointly fund and administer the state School Readiness and Quality Enhancement grant programs for designated CT communities
- 2. Jointly fund training for child care providers through the CT Charts a Course professional development system including activities to augment the statewide Accreditation Facilitation Project.
- 3. Develop model agreements between Head Start and local education agencies in collaboration with the Head Start Association and member agencies,
- 4. Collaborate to produce necessary materials to support parents and providers to use in transitioning their children from preschool to school.
- 5. Develop programs to promote family involvement in early care and education programs.

- 6. Develop and/or fund curricula for child care providers on a variety of issues.
- 7. Collaborate to support Family Resource Centers in designated CT communities.
- 8. Collaborate to ensure young children with disabilities and special needs are provided equal access and equal benefit in child care programs.
- 9. Collaborate to develop, implement and evaluate training and technical assistance on issues related to serving young children with disabilities and special needs in child care.
- 10. Collaborate on the rules and procedures that apply to child care subsidy reimbursements and parent fees.

#### **Department of Public Health**

DSS and DPH have an interagency agreement that:

- 1. transfers child care funds to DPH to support child care licensing and inspection staff.
- 2. updates the data base of licensed providers for Child Care INFOLINE, Connecticut's resource and referral project, funded by DSS.
- 3. updates the data base of licensed providers for DSS Child Care Assistance Program (CCAP) and allows CCAP to notify DPH when they learn about over-capacity and/or unlicensed operating situations
- 4. notifies DSS of all license suspensions and revocations.
- 5. expedites the licensing process for new programs funded through the CT School Readiness project or the Child Care Facilities Loan Fund.
- 6. educates informal providers regarding immunization issues.

#### In addition:

- 1. DSS and DPH are represented on the Connecticut Birth to Three Interagency Coordinating Council, which is a forum for policy review and advocacy on issues regarding young children with disabilities.
- 2. DSS and DPH are represented on the Child Day Care Council, which is a forum for policy review and advocacy on child care issues.
- 3. DSS and DPH are represented on the Head Start-State Collaboration project, which has done extensive planning on issues regarding young children and families. The departments jointly applied for a Maternal and Child Health grant to create a Healthy Child Care initiative. That grant was attached to the Head Start project as a Collaboration work group. Healthy Child Care Connecticut continues to plan and implement projects to promote healthy practices in child care settings and to connect child care programs with health resources and address developmental and behavioral needs for children with special needs.

#### **Department of Labor**

#### DSS and DOL:

- 1. examined programs and practice in services to families on public assistance and produced recommendations regarding child care subsidy regulations, client-centered assessments and parent participation on planning advisory bodies.
- 2. participated on ad hoc committees to plan operational changes to the employment and training programs for public assistance recipient.
- 3. developed a packet of printed materials to assist families on public assistance to find quality child care for their children. These packets are distributed to DSS regional intake units and DOL Job Service workers for use with parents of young children.
- 4. trained DOL and Workforce Investment Boards staff regarding how families on public assistance can use the Child Care Assistance Program.
- 5. collaborated to develop the essential data elements to be shared between the DOL Case Management Information System and the CCAP Child Care Management Information System.
- 6. distributed brochures and videos on choosing quality child care for use by DOL staff in Job Centers and Workforce Investment Boards.
- 7. have begun planning for developing training opportunities through the DOL systems for people interested in child care careers.
- 8. completed a successful federal application for a pilot Child Care Apprenticeship Program
- 9. continue to meet as a workgroup with representatives from the Job Centers and Workforce Investment Boards to "troubleshoot" issues regarding child care access for families participating in job related activities.
- 10. have begun planning on issues regarding workforce and wage issues

#### **Department of Mental Retardation**

#### DSS and DMR:

- 1. Are represented on the Connecticut Birth to Three Interagency Coordinating Council and Healthy Child Care Connecticut project which are forums for policy review and advocacy on various issues regarding young children with special needs and caregivers to support such children.
- 2. Co-facilitated CT's Early Care and Education Inclusive Team as part of the federal Child Care Bureaus' national MAPS to Inclusive Child Care project.
- 3. Co-facilitated the development of an "on-site consultative and technical assistance" service delivery model to support early care and education caregivers.

- 4. Distributed a brochure on Early Growth and Development developed by the CT Birth to Three System to all child care providers in Connecticut.
- 5. DMR participated in discussions concerning the revisions to the Child Care Assistance Program as it pertains to children and adults with disabilities.
- 6. DMR reviewed and critiqued the curriculum developed by the University of CT to train early care and education caregivers on issues concerning working with children with special needs.
- 7. DMR developed a Memorandum of Agreement (MOA) with the 15 DSS funded Community Health Care organizations that support outreach and enrollment activities for the states' children's health insurance program which is named HUSKY. The MOA will cover outreach and referral of appropriate children and families between these 15 organizations and the Birth to Three System.

#### **Department of Social Services - Internal Units**

Child Care Team and Elderly and Adult Disabilities Divisions:

- 1. Reviewed and analyzed sample number of CCAP families' usage of elderly and/or disabled child care providers.
- 2. Created an internal agency study group to evaluate the appropriateness of elderly and/or disabled child care providers from the perspective of the child's safety and the richness and quality offered.
- 3. Provided a liaison and printed program materials and brochures to various elderly groups in the community to help grandparents raising grandchildren make child care choices and understand CCAP procedures.
- 4. Participated in planning a national video satellite conference for grandparents raising grandchildren, which raised issues and disseminated information on many topics including child care.
- 5. Provided child care printed materials at the state's Family Day celebration and the AARP sponsored grandparent/grandchild day at the Pilot Pen tournament.
- 6. Exploring intergeneration programming activities

#### Child Care Team and Child Support Bureau:

- 1. Established protocols among child care providers and the local Child Support offices to refer families to child support services.
- 2. Completed a demonstration federal project that linked Child Support, Child Care and Head Start services in select pilot sites.

- 3. Completed and distributed public information materials.
- 4. Participating on a new federal initiative among Child Support, Child Care and TANF

#### SECTION 2.2A PUBLIC HEARING NOTICE

#### CHILD CARE AND DEVELOPMENT FUND - PUBLIC FORUM AND HEARINGS

The Department of Social Services (DSS) Child Care Team\* in collaboration with the Child Day Care Council and the United Way of Connecticut Child Care INFOLINE, is convening two statewide public forums and five hearings to provide Connecticut residents an opportunity to comment on child care services in Connecticut. DSS must prepare the state s Child Care Plan to access federal funds. The plan must be submitted to Washington, D.C. by July 1, 2001. Your participation in this process is welcomed. Please share this schedule with others and encourage their involvement.

<u>PU LIC FO U</u>	n orientation to the Child Care Pla	<u>uirements.</u>	
OC Y ILL	Thursday, ay , 2001	OO OO P SESSION OO O P SESSION 1 Silas Deane ighwa oc y ill, CT	
PU LIC E IN S	n opportunity to	ment on the draft Child Care Plan. The draft plan will be www.dss.state.ct.us/ccare/ccare.htm. See Child Care Feder	
TFO D	Friday, ay , 2001	OO OOP SESSION Legislative Office uildin OO OP SESSION OO Capitol ve., oom artford, CT	
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DEN	Wednesday, ay 1 , 2001	00 00 P SESSION eefe Community Center of the SESSION of P SESSION amden, CT	
PU LIC FO U	opportunity to review the revised	Child Care Plan and summary of the hearings.	
OC Y ILL	Tuesday, June 12, 2001	OO OO P SESSION OO O P SESSION United Way of Connect 1 Silas Deane ighwa oc y ill, CT	

<sup>\*</sup> The DSS Child Care Team is prepared to answer questions concerning this information. They can be reached by calling in-state toll-free 1-800-811-6141 or (860) 424-5598 from within the Hartford calling area.

#### SECTION 3.2A

# Connecticut Child Care Assistance Program Payment Rates

The payment rates are used to calculate child care benefits. These rates also support a TANF family when that family is a family of one TANF child.

Child care for 35 hours or more per week is considered full-time. Anything less than 35 hours is considered part-time.

Documented costs for children with special needs are accommodated on a case by case basis.

For determining child care rates, the state is divided into three regions, REGION A, B & C. The region is determined by the town where the child receives care, not by the town where the child lives.

Children under the age of 3 years are considered INFANT/TODDLER. Children age 3 to 6 years are considered PRESCHOOL. At age 6, children are considered SCHOOL AGE.

Approved Rate Table													
Region A	Infant Toddler				Preschool			School Age					
	P/T		F/T		I	P/T		F/T		P/T		F/T	
Center	\$	4.57	\$	160.00	\$	2.86	\$	115.00	\$	3.00	\$	105.00	
Group Home	\$	4.80	\$	168.00	\$	3.29	\$	140.00	\$	3.00	\$	105.00	
Family Day Care	\$	3.57	\$	125.00	\$	3.57	\$	125.00	\$	4.00	\$	140.00	
Other (Informal)	\$	2.43	\$	85.00	\$	2.14	\$	75.00	\$	2.14	\$	75.00	
Region B	Infant Toddler		Preschool			Preschool							
	P/T F/T		F/T	P/T F/T			P/T		F/T				
Center	\$	4.14	\$	145.00	\$	2.71	\$	105.00	\$	3.00	\$	105.00	
Group Home	\$	3.71	\$	130.00	\$	2.86	\$	118.00	\$	3.00	\$	140.00	
Family Day Care	\$	3.14	\$	110.00	\$	2.86	\$	100.00	\$	4.00	\$	105.00	
Other(Informal)	\$	2.43	\$	85.00	\$	2.14	\$	75.00	\$	2.14		\$ 75.00	
Region C	School Age			Preschool			Preschool						
	P/T		F/T		I	P/T		F/T	]	P/T		F/T	
Center	\$	3.57	\$	125.00	\$	2.57	\$	100.00	\$	2.00	\$	75.00	
Group Home	\$	2.71	\$	95.00	\$	2.71	\$	100.00	\$	2.00	\$	75.00	
Family Day Care	\$	2.86	\$	100.00		2.71	\$	95.00	\$	3.00	\$	105.00	
Other (Informal)	\$	2.43	\$	85.00	\$	2.14	\$	75.00	\$	2.14	\$	75.00	

Stratford

Suffield

Tolland

Union

Vernon Voluntown

Wallingford Waterford

Trumbull

Thompson

#### Child Care Assistance Program

#### Town Listings By Regions

Fairfield Region A-Bethel Farmington Bridgewater Franklin Brookfield Glastonbury Danbury Granby Darien Griswold Greenwich Groton New Canaan Guilford New Fairfield Haddam New Milford Hamdem Newtown Hampton Norwalk Hartford Redding Hebron Ridgefield Killingly Roxbury Killingworth Sherman Lebanon Stamford Ledyard Washington Lisbon Weston Lymen Westport Madison Wilton Manchester Mansfield Region B-Marlborough Andover

Meriden Ashford Middlefield Avon Middletown Berlin Milford Bethany Monroe Bloomfield Montville Bolton New Britain Bozrah New Haven Branford Newington Bridgeport New London Bristol North Branford Brooklyn North Haven Burlington No. Stonington Canterbury Norwich Canton Old Lyme Chaplin Old Saybrook Chester Orange Clinton Plainfield Colchester Plainville Columbia Plymouth Coventry Pomfret Cromwell Portland Deep River

Salem

Sterling

Stonington

Durham

Eastford

East Granby

East Haddam

East Hampton

East Hartford

East Windsor

East Haven

East Lyme

Ellington

Enfield

Essex

Easton

Westbrook West Harford West Haven Wethersfield Willington Windham Windsor Windsor Locks Woodbridge Woodstock Region C-Ansonia Barkhamsted Beacon Falls Bethlehem Canaan Cheshire Colebrook Cornwall Derby Goshen Hartland Harwinton Kent Litchfield Middlebury Morris Naugatuck New Harford Norfolk North Canaan Oxford Prospect Salisbury Seymour Preston Sharon Putnam Southbury Rocky Hill Thomaston Torrington Scotland Warren Shelton Waterbury Simsbury Watertown Somers Winchester Southington Wolcott South Windsor Woodbury Sprague Strafford

#### SECTION 3.3.2A

#### **INCOME GUIDELINES**

"Income" means the gross income of the family derived from the following:

- (a) **Earned income** from compensation for personal services including wages, salaries, commissions, bonuses, and earnings from self-employment or contractual agreements; and
- (b) **Unearned income** including, but not limited to, pensions, annuities, dividends, interest, rental income, estate or trust income, royalties, social security or supplemental security income, unemployment compensation, workers' compensation, alimony, child support, foster care payments, AFDC payments and any other cash income.
- **"Family"** means the parent(s), a parent's spouse, and their minor children who reside together, except that a foster child shall be considered a family of one, and a child receiving Aid to Families with Dependent Children (AFDC) living with a relative, other than a parent, shall be considered a family of one.

### SECTION 3.5.1A

### Child Care Assistance Program

## Family Share Schedule

Parents are responsible for paying a share of the CCAP monthly approved amount towards their child care costs.

<b>Family Share</b>	If Household Income Is	Example: CCAP approved amount is \$300
2% of Gross Income	less than 20% SMI	Household Income is \$9000 or \$7540 per
4% of Gross Income	less than 30% SMI	month
6% of Gross Income	less than 40% SMI	Family Size $= 2$
8% of Gross Income	less than 50% SMI	Family Share is 2% of monthly income
		Family Share = \$15
10% of Gross Income	less than 75% SMI	CCAP will pay \$285 to provider

# GROSS MONTHLY INCOME BY STATE MEDIAN INCOME LEVELS Effective 7/01/01

Family Size	<20%	6SMI	< 309	%SMI	<40%	SMI	< 509	%SMI	<75	5%SMI
1	\$	655	\$	982	\$	1,310	\$	1,637	\$	2,455
2	\$	856	\$	1,284	\$	1,712	\$	2,141	\$	3,211
3	\$	1,058	\$	1,586	\$	2,115	\$	2,644	\$	3,966
4	\$	1,259	\$	1,888	\$	2,518	\$	3,148	\$	4,721
5	\$	1,460	\$	2,191	\$	2,921	\$	3,651	\$	5,477

# SECTION 4.4A

# TANF DEFINITIONS AND CRITERIA

# CONNECTICUT DEPARTMENT OF SOCIAL SERVICES UNIFORM POLICY MANUAL

Date: 10-1-99	Transmittal: UP-00-1		8530.60
Section: Jobs First		Type:	POLICY
Chapter: Employment Services		Program:	ES
Subject: Good Cause for Non-Compliance			

#### 8530.60 A. General Circumstances

Good cause is considered to exist when circumstances beyond the participant's control reasonably prevent him or her from complying with an Employment Services requirement.

#### B. General Circumstances

Good cause includes, but is not limited to, the following circumstances when they reasonably prevent the person from participating in an Employment Services activity:

- 1. illness of the individual;
- 2. illness of a family member that requires care to be provided by the individual;
- 3. unavailability of child care;
- 4. unavailability of transportation;
- 5. a family emergency;
- 6. domestic violence;
- 7. unreasonable terms and conditions of employment.

#### C. <u>Victims of Domestic Violence</u>

Good cause for not complying with an Employment Services requirement exists when a participant cannot comply with an Employment Services requirement due to domestic violence or the risk of further domestic violence which is of such severity as to reasonably prevent compliance with the requirement. Good cause may be found in appropriate cases with consideration of the following factors:

- 1. the participant has physical injuries caused by abuse or psychological effects of abuse prohibiting such participant to work or engage in other Employment Services activities; or
- 2. the Employment Services activity or employment is substantially disrupted due to domestic violence, including civil or criminal legal proceedings related to such domestic violence; or
- 3. the abuser actively interferes with the participant's Employment Services activity or employment, attendance at the Employment Services activity or employment, or child care arrangements; or
- 4. an Employment Services activity or employment location puts the applicant or recipient at risk; or
- 5. Employment Services requirements result in the inability or increased difficulty of the participant to escape domestic violence.

#### D. Additional Good Cause Reasons - Failure to Maintain Earnings

In addition to B or C, above, the following good cause criteria may apply to a voluntary quit, reduction in hours or wages of employment, or termination of employment due to wilful misconduct:

- 1. The Department of Labor determines that a person who quit his or her job had good cause to quit. If the Department of Labor determines that good cause does not exist for unemployment compensation purposes, a separate determination of good cause is made by the Department of Social Services.
- 2. The Department of Labor determines that a person who was terminated from employment by the employer is eligible for Unemployment Compensation benefits or the Department of Labor determines willful misconduct did not exist but the individual is not eligible for Unemployment Compensation. If the Department of Labor determines that a person was fired for willful misconduct, the Department of Social Services accepts that determination unless the person had good cause as described in this chapter.
- 3. A quit is part of an employment pattern in which workers frequently move from one employer to another, such as migrant farm labor or construction work
- 4. The person quit a job or reduced hours to accept other employment, which has the potential of leading to self-sufficiency.

- 5. The person quit the job or reduced hours to accept other employment with earnings at or above the level of the previous employment.
- 6. The person quit employment or reduced hours in order that another assistance unit member may accept an offer of employment. This exemption is allowed only when the new employment provides a wage at or above the level of the previous employment of the person who quit.
- 7. The person occasionally reduces work hours to meet family obligations.
- 8. The person left a temporary employment agency, which has not or cannot provide him or her with an appropriate work activity.

#### E. Child Care Criteria

Good cause exists for parents who leave employment, refuse to accept employment, or fail to take part in an Employment Services activity under the circumstances described below.

- 1. To qualify for good cause for lack of child care, the following circumstances must exist:
  - a. A person must be the only parent in the home or the only parent in the home capable of caring for the child due to the physical or mental incapacity of the second parent; and
  - b. The parent must be caring for his or her child who is under thirteen (13) years of age or who requires child care due to special needs.
- 2. A person who meets the criteria described in 1, above, is determined to have good cause if he or she has demonstrated inability to obtain child care because appropriate child care is not available within a reasonable distance from the person's home or work site.
- 3. A person who meets the criteria described in 1, above, is also determined to have good cause if appropriate and affordable formal child care is unavailable and informal child care by a relative or a friend is unavailable or unsuitable.
- 4. In determining if a person meets the requirements of this provision, the following definitions apply:
  - a. **Appropriate child care** means care that meets the health and safety standards that are required for providers who receive payments under the provisions of the Child Care Assistance Program (CCAP), as mandated by Connecticut General Statutes 17b-749.

- b. **Reasonable distance** means care that can be accessed by public or private transportation that is available to the client without interfering with the parent's ability to maintain employment. If transportation is not available, child care must be within reasonable walking distance from the person's home.
- c. **Unsuitable informal care** means care that is exempt from the State's licensing requirements, but does not meet the health and safety standards described in a, above, or is otherwise shown to be unsafe or inappropriate for the child.
- d. **Affordable formal child care** means licensed child care that costs the parent (after subsidies) no more than ten percent of his or her total income.